

Bureau of Environmental Health
 8930 Stanford Boulevard, Columbia, MD 21045
 Main: 410-313-2640 | Fax: 410-313-2648
 TDD 410-313-2323 | Toll Free 1-866-313-6300
www.hchealth.org
 Facebook: www.facebook.com/hocohealth

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 7/15/19 **ONSITE SEWAGE DISPOSAL SYSTEM** P 565552
 APPROVAL DATE: _____ **PERMIT:** **REPAIR** A _____
 PROPERTY ADDRESS: 1259 Heritage Farms Court
 SUBDIVISION: Heritage Farms LOT: 3 TAX ID: 03-306216
 CONTRACTOR: Legacy Septic EMAIL: _____
 CONTRACTOR ADDRESS: 1538 Manchester Road, Westminster, MD 21157 PHONE: 410-840-8766
 PROPERTY OWNER: Brian Thomas EMAIL: (301) 370-4121
 OWNER ADDRESS: 1259 Heritage Farms Court, Sykesville, MD 21784 PHONE: 443-535-6931

SEPTIC TANK SIZE (GALLONS): Existing PUMP CHAMBER CAPACITY (GALLONS): N/A PUMP SIZE: -
 NUMBER OF BEDROOMS: 3 HOUSE SQ. FT. - APPLICATION RATE: 0.6
 DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>156</u>	INLET DEPTH: <u>2-2.5</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>5 (max)</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>8</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>3 (.62)</u>

LOCATION: **TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.**

NOTES: Install 2 x 78' trenches above perc test A. Trenches will follow contour alongside existing driveway. Manhole to be added to tank.

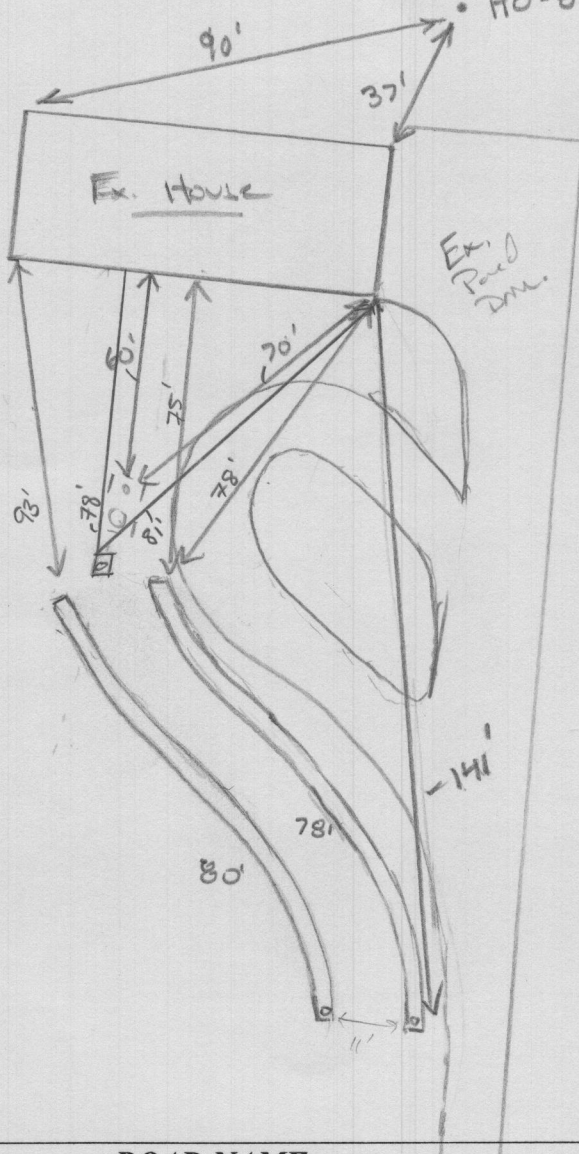
ISSUED BY: Kevin Wolf ISSUE DATE: 7/15/19 EXPIRATION DATE: 7/15/20

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADE FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM
 ELECTRICAL PERMIT ISSUED E N/A
- NOTE: THE HCHD DOES NOT WARRANT ANY SYSTEM AND CANNOT GUARANTEE THE PERFORMANCE OF THIS SYSTEM AS DESIGNED. BY ACCEPTING THIS PERMIT, THE OWNER AND/OR APPLICANT ACKNOWLEDGE THAT THE SPECIFICATIONS DETAILED IN THIS DESIGN ARE ONE POSSIBLE OPTION AND THAT THE HCHD WILL REVIEW OTHER PROPOSALS. YOU HAVE THE OPTION TO SEEK THE ADVICE OF A QUALIFIED DESIGN CONSULTANT OR PROFESSIONAL ENGINEER FOR FURTHER GUIDANCE.
- NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT. CALL 410-313-1771 TO SCHEDULE INSPECTIONS.

NOT TO SCALE

Ex. Well
HO-81-0430



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
3	2.5'	5'
NUMBER OF TRENCHES	2	
TOTAL LENGTH	158 F	
ABSORPTION AREA	474 SF	
DISTRIBUTION BOX LEVEL	SPEED	
DISTRIBUTION BOX BAFFLE	YES	
DISTRIBUTION BOX PORT	YES	

SEPTIC TANK DATA

SEPTIC TANK I LEVEL	Existing
MANUFACTURER	—
CAPACITY	1250 GAL
SEAM LOC	mid
TANK LID DEPTH	12"
BAFFLES	new outlet
BAFFLE FILTER	—
MANHOLE LOC	Rear
6" PORT LOC	Front
WATERTIGHT TEST	OK
SLOTTED	no
DATE ON LID	N/A
PUMP/SEPTIC TANK LEVEL	N/A
MANUFACTURER	—
CAPACITY	— GAL
SEAM LOC	—
TANK LID DEPTH	—
BAFFLES	—
BAFFLE FILTER	—
MANHOLE LOC	—
6" PORT LOC	—
WATERTIGHT TEST	—
SLOTTED	—
DATE ON LID	—

ROAD NAME

PRE-CONSTRUCTION:

4/30/19 Install new Dist. box between new trenches approximately 5'-7' from existing septic tank. Run 2x78' trenches on contour as flagged @ time of perc testing (km) 7/15/19 owner changed permit to legacy, (km) 7/16/19 onsite w/ legacy w/ the system layout as indicated @ 4/30/19 msp (km)

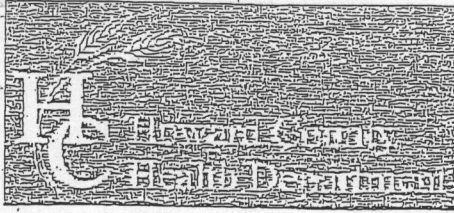
INSTALLATION:

7/16/19 upper trench completed. Lower trench being dug. Stayed on site for 1/2 install. OK to cover work when complete. Asked contractor to send pictures of Dbox network. Will stop back tomorrow to gather final measurement (km) 7/17/2019
 OBTAINED APPROX DISTANCES FROM APPROX. LOCATION OF INSTALLED D BOX AND TRENCHES (km)

FINAL INSPECTOR

DATE OF APPROVAL

07/19/2019



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Dr. Maura J. Rossman, M.D., Health Officer

INFORMATION FORM - SEPTIC SYSTEM REPAIR/UPGRADE

Reason for Request:

- Reason for Request:
- [x] Failing System
- [] System relocation for proposed addition
- [] System upgrade for proposed addition
- [] Inadequate treatment zone
- [] Collapsed septic tank
- [] Collapsed drywell

Has the septic tank been pumped within the last month?

- Has the septic tank been pumped within the last month?
- [] Yes Date pumped: _____
- [x] No

Was a visual inspection of the septic tank and/or drain fields conducted?

- Was a visual inspection of the septic tank and/or drain fields conducted?
- [] Yes Explain observations: _____
- [x] No

Existing system design

- Existing system design
- [] Drywell
- [x] Trench
- [] Mound
- [] Unknown
- [] Other: _____

Was a visual inspection of the sewage line conducted?

- Was a visual inspection of the sewage line conducted?
- [] Yes
 - Blockage leading to the tank
 - [] Yes. Explain: _____
 - [] No
 - Blockage leading to the field
 - [] Yes. Explain: _____
 - [] No
- [x] No

Is discharge surfacing on the ground?

- Is discharge surfacing on the ground?
- [x] Yes
- [] No

Additional Comments: _____

*For REPAIRS, are the owners proposing, or do they plan to add in the future, any additions or modifications to the property, i.e. pools, living space additions, garages, etc? This information must be disclosed at the time of this application. The Health Department will not be able to accommodate requests in the field for property modifications unrelated to the repair request. Such requests may require an additional fee, testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulation.

Septic Contractor: Fogley Septic Contractor's Phone: 410-795-5670

Contractor's Address: 580 Orchard Rd 8419 Suite 21784

Property Address: 1259 Heritage Farms Ct County file: _____

Subdivision: Heritage Farms Lot 3 Year Built: _____

Owner's Name: Brian Thomas Owner's Phone: 443-595-6931

Name of previous owners: David Ballantine Existing bedrooms: 3

Proposed bedrooms: _____

Has this request been previously discussed with a Sanitarian? (Name): _____

Public Sewer available/nearby: NO

*A Sanitarian will be in contact within three business days, depending upon the urgency of the situation, to coordinate the scheduling/review of the repair or upgrade.

Prior to scheduling inspections, scaled plans should be submitted to clarify the nature of the addition.

Print out a copy of Real Property Data via Dept. of Taxation website Indexed file found _____

If public sewer may be nearby, verify whether sewer is technically "available" through the Bureau of Engineering.

If sewer is available and the property is within the Metropolitan District, connection to sewer is required. If the owner believes reason for exemption exists, the owner should justify the request in writing.

If soil/site conditions are limited and sewer and/or Metro District status is not conducive to connection, the Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. The Owner should contact the Bureau of Utilities for details.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. The contractor is to notify office of the emergency situation as soon as possible.



HOWARD COUNTY HEALTH DEPARTMENT

64842

P5

DATE
4/15/19

Received From

Loges Septic Clean 410 195-5000

PHONE #

For

Rene Kepler - 1259
Heritage Farm

CASH

CHECK

NO.

143

Three hundred thirty

Dollars

\$

330 00

Received By

Kepler